

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712294

**Entity Name:** THE OPTIMIST CLUB OF MARIANNA, FLORIDA, INC.

**Current Principal Place of Business:**

2993 RUSS ROAD  
MARIANNA, FL 32446

**Current Mailing Address:**

P. O. BOX 943  
MARIANNA, FL 32447 US

**FEI Number: 59-6178206**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

HARRISON, RALPH W  
2993 RUSS ROAD  
MARIANNA, FL 32446 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE: RALPH W. HARRISON**

**02/23/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HOLLIS, JACK E .  
Address        P. O. BOX 943  
City-State-Zip: MARIANNA FL 32447

Title            VP  
Name            O'BRIEN, SCOTT  
Address        P. O. BOX 943  
City-State-Zip: MARIANNA FL 32447

Title            SECRETARY/TREASURER  
Name            HARRISON, RALPH W.  
Address        2993 RUSS ROAD  
City-State-Zip: MARIANNA FL 32446

Title            DIRECTOR  
Name            GIBBS, JAMES A.  
Address        P. O. BOX 943  
City-State-Zip: MARIANNA FL 32447

Title            DIRECTOR  
Name            CENTERS, LOWELL  
Address        4513 RED OAK TRACE  
City-State-Zip: MARIANNA FL 32446

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JACK E. HOLLIS**

**PRESIDENT**

**02/23/2017**

Electronic Signature of Signing Officer/Director Detail

Date